

**DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS
BUILDING AND LAND REGULATION ADMINISTRATION
PERMIT SERVICE CENTER RM. 2100
941 NORTH CAPITOL STREET, NE
Washington, DC 20002
Tele: 202/442-4470 Fax: 202/442-4862**

**NEW RAZE PERMIT PROCEDURES UNDER THE 1999 DISTRICT of COLUMBIA
BUILDING SUPPLEMENT**

In order to raze a building, the owner must first obtain a Raze Permit, which vests the Owner's rights to raze the building. In addition, the Owner or Contractor must also obtain a Supplemental Razing Operations Permit, on a supplemental application. The Razing Operations Permit approves the method of demolition and proof that the utilities have been properly disconnected.

Raze applications shall be processed at the time of submittals and a raze permit issued over the counter except for structures subject to Historic and Fine Arts approval.

The raze permit fees shall be assessed based on information provided by the applicant, any fee adjustment that may be necessary after field inspection shall be assessed on the Supplemental Razing Operations Permit.

Conditions typed on each raze permit shall read - "Restrictions: No razing operations shall commence until a Supplemental Razing Operations Permit is obtained".

The Permit Service Center, shall prepare and issue clearance letters for the following approvals:

<i>DPW - Vector Control</i>	<i>Water/Sewer</i>
<i>DPW - Public Space/Transportation</i>	<i>ERA - Erosion Control</i>
<i>Construction Inspection</i>	<i>Plumbing Inspection</i>
<i>Bell Atlantic Telephone Co.</i>	<i>Washington Gas</i>
<i>Potomac Electric Co.</i>	<i>Historic Preservation Review</i>
<i>Asbestos Abatement</i>	

Required documentation to be submitted by applicant:

Certificate of Insurance - General Liability

Upon receipt of the approved clearance letters to the Permit Service Center, the Supplemental Razing Operations Permit is issued to proceed with the demolition of the structure by the razing method specified in the application.

Note: Applicable code sections can be found in the 199 D.C. Building Code Supplement Chapter I Section 107.2.4 107.2.10 (5), and 110.1

INSTRUCTIONS TO APPLICANTS APPLYING FOR RAZE PERMITS

1. Obtain an "Application for Raze/Supplemental Razing Operations Permit Form BLRA-55 at the Permit Center 941 North Capitol Street, NW, Room 2100.
2. The owner of record & the raze contractor must sign the application. When the owner of record & raze contractor sign the Raze Permit section item #26 and #27 - Part A; they are not required to sign items #49 and #50 of Part B. Applicants should also fill out items #44 thru #47 of the Supplemental Raze Operations Permit.
3. Return the application to the Information Counter where it will be checked for completeness and for holds (e.g. Historic Preservation). If the property is subject to any holds, the applicant will be instructed how to proceed in order to clear the holds before the raze process can be continued. Subsequent the applicant will be issued the necessary raze sign-off letters.
4. Before a Raze Operation Permit can be issued the subject building(s) must be unoccupied. If the building is still occupied, the raze permit application will be accepted and processed pending notification by the applicant that the building is vacant. Notification of the intent to raze will be given to the D.C. Register, and the Advisory Neighborhood Commissioner (ANC), with a 30-day review time period.
5. Razing Insurance Requirements:

- a. A certificate of insurance covering the raze operation/contractor must be submitted to the Office of the Chief, Permit Center, Rm. 2100. The insurance policy number and expiration date must be written on the permit application.

EXCEPTION: To raze an accessory building 500 square feet or less in area and not more than one story in height, wholly detached from any other building on the same or adjoining premises will not require a certificate of insurance.

- b. The certificate should reflect that the holder of the insurance is as follows

Chief, Permit Center, Rm. 2100
Permit Processing Division
941 North Capitol Street, NE
Washington, DC 20002

- c. Amounts of required insurance coverage for raze operations are as follows:

Bodily Injury	\$100,000.00
Aggregate	300,000.00
Property Damage	100,000.00

- d. The certificate of insurance must include a thirty(30) day in advance notice cancellation clause.

e. Description of Operations:

The certificate must state that the insurance covers "Razing Operations in the District of Columbia" if the scope of the insurance is for blanket coverage.

However, if the insurance is for one specific address only, certificate should read as follows:

"Razing Operations at _____."
(address of raze operation)

6. Party Wall(s) in Conjunction with a Raze Operation

Raze permit application for buildings involving party walls must be accompanied by two(2) copies of a plan or sketch showing how the party wall(s) will be protected.

7. Applicants must specify the method that will be used to raze the structure (ball, clamshell, bulldozer; by hand, etc).

8. It is important that the permit applicant consult with the Soil Erosion Contact Representative in the Permit Center, Rm. 2300 and obtain the soil erosion package for raze contractors. This material should assist the contractor in preparing the raze operation plan.

9. **RAZE PERMIT FEE:** The fee for a raze permit is based upon the total volume (cubic feet) of the building to be razed, at a rate of \$.01 per cubic foot.

A sidewalk deposit and/or tap bill is additional costs, which may be required. Contact Anthony Downing @ 202/442-4670 for Public Space/DPW requirements.

10. A plumbing permit is required for all water/sewer line caps. This permit must be obtained by a Registered Licensed plumber of the District of Columbia.

If there are further questions pertaining to razing operations, please contact the Chief, Permit Center Room 2100, 941 North Capitol Street, NW, Washington, DC - Telephone: 202/442-4470.

PERMIT NUMBER	ZONING DISTRICT	WARD NUMBER

**DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUILDING AND LAND REGULATION ADMINISTRATION**

PERMIT SERVICE CENTER (202/442-4470)
941 North Capitol Street, N.E., Suite 2100
Washington, D.C. 20002

APPLICATION FOR RAZE PERMIT OR SUPPLEMENTAL OPERATION RAZE PERMIT
(Print in ink or type; Do not write in shaded areas)

1. Address of Proposed Work:		2. Lot:	3. Square:	4. Application Date: / /
5. Owner of Building or Property:			6. Phone: Business Other E-Mail	
7. Address of Owner: <i>(including Zip)</i>				
8. Agent or Contractor for Owner: <i>(if applicable)</i>			9. Phone: Business Other E-Mail	
10. Address of Agent or Contractor: <i>(including Zip)</i>				
11. Type of Permit: (check one of the following and fill out the appropriate section on the back) " Raze Permit " Supplemental Razing Operation Permit				
12. Description of Building to be Razed: <i>(e.g. two story brick single family dwelling)</i>				
13. Use(s) of Building or Property:			14. Ex. No. of Stories of Building:	
15. Materials of Building:				

**TO REPORT WASTE, FRAUD, OR ABUSE BY ANY D.C. GOVERNMENT OFFICE OR OFFICIAL,
CALL THE INSPECTOR GENERAL AT 1-800-521-1639
ALL CALLS ARE CONFIDENTIAL**

A. RAZE PERMIT

[Note: No razing operations shall commence until a supplemental Razing Operations Permit is obtained]

16. Raze Contractor-s Name:			17. Contractor-s Address (including Zip):			18. Phone:	
19. " Historic District 20. " Fine Arts	21. Raze Entire Building? " Yes " No	22. Building Condemned? " Yes " No	23. Building Vacant? " Yes " No	24. Public Space Vault? " Yes " No	25. Party Wall? " Yes " No (if Yes, needs signature of adjoining Owner) _____		
26. Raze Contractor Signature:				OFFICIAL USE ONLY			
27. Owner-s Signature:				\$ FEE _____	BY _____	DATE _____	

B. SUPPLEMENTAL RAZE OPERATIONS PERMIT

28. Raze Contractor-s Name:					29. Phone:	
30. Contractor-s Address (including Zip):					31. Raze Method:	
32. Insurance Company:			33. Policy or Certificate No.:		34. Expiration Date:	
35. " Historic District 36. " Fine Arts	37. Raze Entire Building? " Yes " No	38. Building Condemned? " Yes " No	39. Building Vacant? " Yes " No	40. Public Space Vault? " Yes " No	41. Party Wall? " Yes " No (if Yes, needs signature of adjoining Owner) _____	
42. Plumber-s Name:		43. License Number:	44. Length: ft.	45. Width: ft.	46. Height: ft.	47. Volume: cu. ft..
48. Asbestos in Building? " No " Yes, Location_____		49. Raze Contractor:			OFFICIAL USE ONLY	
_____		50. Owner-s Signature:			\$ FEE _____	BY _____
					DATE _____	